Anesthesia through the Ages

By Yonina Loskove

The earliest mention of anesthesia, the use of medication to relieve pain, is found in the Bible in the story of Creation. During the creation of man and woman in Genesis, the procedure for creating woman was described as follows. “And the Lord God caused a deep sleep (tardaymah) to fall upon man, and he slept, and He took one of his sides, and He closed the flesh in its place. And the Lord God built the side that He had taken from man into a woman, and He brought her to man” (Genesis 2:21-22). Many Jewish scholars and commentators interpret this Biblical word, “deep sleep” (tardaymah) as anesthesia. Both Rabbi Samson Raphael Hirsch, a nineteenth century German Rabbi and scholar, and Rabbi Meir Leibush, a nineteenth century Russian Rabbi and scholar commonly known as the Malbim, commented that the word tardaymah refers to a form of anesthesia. Tardaymah and the concept of a “deep sleep in order not to feel pain” is found in various writings throughout Jewish literature.

Throughout the Bible and Talmud there are many recorded injuries and incidents that require some form of anesthetic to conduct surgery or to relieve pain. The Babylonian Talmud noted the usage of alcohol as an anesthetic before execution. “When one is led out to the execution, he is given a goblet of wine containing a grain of frankincense in order to benumb his senses, for it is written: ‘Give strong drink unto him that is ready to perish and wine unto the bitter in soul’ [Proverbs 31:6]” (Sanhedrin 43a). Another instance of the usage of an anesthetic was recorded for an abdominal operation performed on Rabbi Eleazar son of Rabbi Simeon (Baba Metzia 83b). The name of the anesthetic fluid was not specified, although it was described as a sleeping draught (samma deshinta) [1].

A case of cranial surgery is described in the Talmud (Kesubos 77b), with much detail presented about the preoperative anesthetic. Abaye stated that the surgeon should create an elixir containing pennyroyal, wormwood, the bark of a nut tree, the shavings of a hide, a lily, and the calyxes that cover red dates, which are boiled together. Thereafter, three hundred cups of the mixture are poured onto the head of the patient until the surface of the skull softens and then the soft spot of the skull is located for surgery. The distinction between these two steps implies that the medical elixir was specifically used as an anesthetic. The Talmud further specified the amount of the mixture needed for the surgery, three-hundred cups, to explain its pain relieving ability. Because the elixir was an antiquated form of anesthetic, the surgeons rushed and needed to use an abundant amount of the anesthetic mixture to reduce as much pain as possible. Today, we have surpassed what was once unimaginable in the field of anesthesia and have medications that are stronger and more effective even in smaller dosages [2].

Profound advancements in the area of anesthetics have brought medical Jewish customs into the twenty first century. Prior to the 1980’s, circumcisions on neonates were performed without the usage of anesthetics, as it was believed that a baby was unable to feel pain. However, research has shown that in a ritual circumcision, infants indeed feel pain during the surgical removal of the foreskin [3]. To alleviate a newborn’s pain, safe topical anesthetics and anesthetic injections have been developed specifically for babies. An effective way to prevent pain during the surgical removal of the foreskin is to inject 1 mL of lidocaine (1%) in a ring pattern around the middle of the penis or at the base of the foreskin. Although this procedure has the advantages of a local anesthetic, the injection itself can cause pain to the infant. The other suggested route is to spread a lidocaine or EMLA (eutectic mixture of local anesthetics) cream on the area of the foreskin an hour prior to circumcision. The cream is a viable choice because the anesthetic is effective and does not enter the blood stream of the infant. However, there is a lag time between the application of the topical ointment and the ability to conduct the procedure.

There are multiple Poskim (Rabbinic authority figures) who question whether using anesthesia for a circumcision is halachically allowed (if it’s in accordance with Jewish codified law). The objections are derived from an understanding of the halachic requirements to fulfill the commandment of circumcision and the need to maintain classical Jewish tradition above all else. It is believed by some that the commandment of circumcision for males must be solidified by the pain felt by the infant during the surgical procedure. It is G-d’s will for the baby to experience pain during the circumcision, and if not, the commandment is not fulfilled. In addition, many Poskim assert that anesthesia should not be utilized during the circumcision procedure in an effort to maintain the traditional Jewish ritual without any modern day innovations impeding on this Jewish custom. Many believe that because circumcisions were done for centuries without the usage of a pain reliever, it is not necessary to use anesthetics just because they are readily available today. Rabbis S. Wosner, M. Halberstam, and M. Eliyahu, are of the opinion that “the Torah prohibits innovation” to be added to Jewish customs.

Other Rabbinic authorities disagree with this viewpoint regarding anesthetics and instead encourage mohelim
(those who conduct the surgical ritual procedure) to use some form of anesthetic while performing the Jewish circumcision. Despite the notion of needing to experience pain during the removal of the foreskin to fulfill the commandment of circumcision, there is no direct source in the Torah, halacha, or kabbala that requires the infant to feel pain. Those who believe in the need for a child to suffer during the circumcision derive this concept from a Midrash (a compilation of Jewish commentaries) which stated that Abraham, during his own circumcision, increased his pain to increase his reward for fulfilling G-d’s commandment, although it was not a requirement. While there is no direct commandment to feel pain during circumcision, there is a belief that some pain must be felt during the procedure. The anesthetic options listed above help to reduce the pain of the procedure, but do not totally eliminate the suffering sensation. Because the baby still feels some pain, there is no concern of not fulfilling G-d’s will if one chooses to use anesthetics. Regarding innovations, many Poskim believe that in certain circumstances, innovations that do not impede upon the main halacha are permitted. Some have agreed that minor alterations to traditions can be changed as long as the main aspects of the halacha are maintained. In the case of circumcision, the use of anesthesia does not seem to directly transgress the commandment of circumcision and only changes a subsidiary aspect of the halacha. This school of thought allows for anesthetics to be used for a traditional Jewish circumcision [4].

While we have seen many instances in Jewish texts relating to the use of anesthesia, the modern day usage of anesthesia in Jewish practices is still contested by some. Despite its practical use in relieving pain in infants, many in Rabbinic authorities strive to maintain the traditional route of circumcision to protect Judaism from being tainted by the modern world. Regardless of this view point, many Rabbis have acknowledged the usefulness anesthetics brought to the Jewish custom of circumcision and have recommended mohelim to use anesthetic injections or a topical cream on the baby. The application of current anesthetic medication to traditional Jewish customs is just one example of the many ways in which modern advancements have integrated into long-established Jewish practices.

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References


